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REPORT

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ON THE

Health of the District

DURING THE YEAR ENDING DECEMBER 31st

1950

by

Dr. JOHN LEIPER, M.B.E.

Medical Officer of Health

together with the

Report of the Chief Sanitary
Inspector

Mr. R. E. INGLEBY

Chief Sanitary Inspector

Conisbrough Urban District Council



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CONISBROUGH URBAN DISTRICT COUNCIL

MEMBERS, 1950

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Chairman of the Public Health Committee :

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JOHN LEIPER, M.B.E., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Chief Sanitary Inspector and Director of Public Cleansing :

R. E. INGLEBY, M.S.I.A., A.R.S.I., R.P.C.

Cert. Insp. of Meat and Other Foods.

Additional Sanitary Inspector :

W. URMSON, M.S.I.A.

Cert. Insp. of Meat and Other Foods.

Chief Clerk (Divisional Public Health Department) :

R. M. MARTIN.

Clerk to the Sanitary Inspector's Department :

Mrs. R. WILLIS.

CONISBROUGH URBAN DISTRICT COUNCIL

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH for the Year 1950

Divisional Public Health Office,
Council Offices,
Adwick Road,
Mexborough.

Mr. Chairman, Lady and Gentlemen,

I have the honour to present my Annual Report for the year 1950, and as the progress during 1949, which has been reported upon, has been maintained in 1950, I find this a pleasant duty.

The birth rate which is gradually falling is, however, appreciably in excess of the average for England and Wales, but the death rate from all causes is also higher than the country as a whole. The infant mortality rate, which is said to give some good indication of the health of the area as a whole, is higher than the average for the country, and higher than it was for your district last year. However, I am quite satisfied that the trend is favourable.

One point that will give you pleasure is to read that during the year, there were only two cases of diphtheria confirmed in your district, and there were no deaths from this disease. I would be happier were there more infants being

immunised before their first birthday. Far too many children are being immunised for the first time in the Schools and these particular children pass their pre-school years unprotected against this deadly disease.

During the year, the system of unified control of the expectant mother group has continued, and Dr. J. C. A. Renshaw has examined five out of every 6 expectant mothers at the Ante-Natal Clinics at Denaby and Conisbrough, in addition to being in charge of their confinement, should it be necessary for this to take place in the hospital.

A system of After-Care has been started at the Montagu Hospital, Mexborough, and this provides a further link up between the Hospital Service, the General Practitioner Service, and the Public Health Service. I have been impressed with the mutual help between my colleagues in General Practice and this Public Health Department, which has become an every day occurrence. An example of this link up is the great number of Home Nursing Visits which are now paid each year to sick persons in their homes by the District Nurse, under the direction of the family Doctor in charge of the case.

During the year however, I think that the main step forward has been the work of the Sanitary Department in ensuring the repairs of dwellinghouses, and the strides being taken by the personal health services. A great deal of individual inspection and advice was given by the Medical Officer of Health and the Senior Sanitary Inspector during the year. This action was taken following your adoption of the Clean Food Model Bye-Laws in October. The smoke in the atmosphere however, and the overcrowding of old sub-standard buildings and the

localised overcrowding which has been found within these old homes, continues to be the main bar to any great progress in the Public Health in your District. Your policy in rehousing families where there is a sufferer from Pulmonary Tuberculosis has indeed been a wise one, and has contributed greatly, I feel, to the control in the spread of this condition in your district.

In conclusion, I would like to thank the Council and Public Health Committee for their keen interest in matters of Public Health, and all the Officers of the Council for their help and advice to me during the year, also to my own staff for the enthusiasm with which they have carried out their duties during the year.

I remain,

Your obedient Servant,

JOHN LEIPER.

M.B.E., M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Medical Officer of Health.

SECTION A.

Natural and Social Conditions of the Area :

Area (in acres)	1,593
Registrar General's estimate of Resident Population	
1950	16,660
Number of inhabited houses (31st December, 1950)...	4,187
Net product of Penny Rate	£221
Rateable Value	£58,964
Height above Sea Level (in feet)	25—275

The main feature of the Conisbrough Urban District is Conisbrough Castle, an ancient monument of great antiquity, which is also the setting for Sir Walter Scott's novel 'Ivanhoe', and whose situation dominates the eastern part of your District. On the ancient background of the Castle and Church the present picture of your District is consequent on the sinking in the last century of coal mines, notably the Denaby Main Mine, which is just inside the northern boundary of what has now become a highly industrial district. The main industry is thus deep seam coal mining and during the year there has been a minimum amount of unemployment.

The housing position consists of an admixture of very old property in the neighbourhood of Conisbrough Castle, Colliery rows built about the turn of the century, and Council houses well situated with modern amenities which now number about 620 built under the various Housing Acts.

VITAL STATISTICS FOR 1950.

	Males	Females	Total
Live Births : Legitimate	155	155	310
Illegitimate	14	8	22
	169	163	332
Still births	7	1	8
Deaths of infants under 1 year ...	10	3	13
Deaths (all ages)	97	85	182
Birth Rate per 1,000 of the estimated resident population			19.92
Stillbirths—Rate per 1,000 total births (live and still)			23.52
Death Rate per 1,000 estimated Population—			
Crude			10.98
Adjusted			13.83

Deaths from Puerperal Causes :	Deaths	Death Rate per 1,000 total (live and still Births)
Pregnancy, Childbirth, Abortion ...	1	2.94

Death Rate of Infants under 1 year of age :

All Infants per 1,000 live Births	39.10
Legitimate Infants per 1,000 legitimate live births...	35.48
Illegitimate Infants per 1,000 illegitimate live births	90.90

Deaths from all Causes during 1950.

	Males	Females
1. Tuberculosis, respiratory	5	6
2. Tuberculosis, other	1	—
3. Syphilitic disease	—	—
4. Diphtheria	—	—
5. Whooping Cough	—	—
6. Meningococcal infections	—	—
7. Acute poliomyelitis	—	—
8. Measles	—	—
9. Other infective and parasitic diseases	—	—
10. Malignant neoplasms, stomach ...	7	2
11. Malignant neoplasms, lung bronchus ...	2	—
12. Malignant neoplasms, breast	—	—
13. Malignant neoplasms, uterus	—	—
14. Other malignant and lymphatic neoplasms	7	11
15. Leukaemia aleukaemia	1	—
16. Diabetes	1	—
17. Vascular lesions of nervous system ...	6	9
18. Coronary disease, angina	14	8
19. Hypertension with heart disease ...	1	1
20. Other heart disease	12	18
21. Other circulatory disease	1	2
22. Influenza	1	—
23. Pneumonia	3	2
24. Bronchitis	7	5
25. Other disease of respiratory system ...	1	1
26. Ulcer of stomach and duodenum ...	—	—
27. Gastritis, enteritis and diarrhoea ...	2	—
28. Nephritis and nephrosis	—	1
29. Hyperplasia of prostate	1	—
30. Pregnancy , childbirth, abortion ...	—	1
31. Congenital malformations	6	—
32. Other defined and ill-defined diseases	10	11
33. Motor vehicle accidents	2	—
34. All other accidents	5	5
35. Suicide	1	1
36. Homicide and operations of war ...	—	—
	<hr/> 97 <hr/>	<hr/> 85 <hr/>

Deaths from :—

Cancer (all ages)	...	...	...	...	...	...	...	30
Measles (all ages)	...	...	...	...	...	...	...	—
Whooping Cough (all ages)	...	...	...	...	...	...	...	—
Diarrhoea (under 2 years of age)	...	...	...	...	...	...	...	2
Pulmonary Tuberculosis (all ages)	...	...	...	...	...	...	...	11
Other forms of Tuberculosis (all ages)	...	...	...	...	...	...	...	1

A comparison of the various rates in your District as against England and Wales, the 126 County Boroughs, etc., and the 140 smaller towns is shown below :—

	England and Wales	126 County Boroughs and Great Towns (including London)	148 Smaller Towns (Resident Population 25,000-50,000 at 1931 Census)	Conisbrough Urban District
Rates per 1,000 Home Population				
Births :				
Live Births	15·8	17·6	16·7	19·9
Still Births	0·37	0·45	0·38	0·48
Deaths :				
All Causes	11·6	12·3	11·6	13·8
Typhoid & Paratyphoid	0·00	0·00	0·00	0·00
Whooping Cough	0·01	0·01	0·01	0·00
Diphtheria	0·00	0·00	0·00	0·00
Tuberculosis	0·36	0·42	0·33	0·72
Influenza	0·10	0·09	0·10	0·06
Smallpox	—	—	—	—
Acute Poliomyelitis (including Polioen- cephalitis)	0·02	0·02	0·02	0·00
Pneumonia	0·46	0·49	0·45	0·30
Notifications (corrected) :				
Typhoid Fever	0·00	0·00	0·00	0·00
Paratyphoid Fever	0·01	0·01	0·01	0·00
Meningococcal Infection	0·03	0·03	0·02	0·00
Scarlet Fever	1·50	1·56	1·61	1·20
Whooping Cough	3·60	3·97	3·15	3·72
Diphtheria	0·02	0·03	0·02	0·06
Erysipelas	0·17	0·19	0·16	0·06
Smallpox	0·00	0·00	—	—
Measles	8·39	8·76	8·36	1·62
Pneumonia	0·70	0·77	0·61	0·24
Acute Poliomyelitis (including Polioen- cephalitis) Paralytic	0·13	0·12	0·11	0·06
Non-Paralytic	0·05	0·05	0·06	—
Food Poisoning	0·17	0·16	0·14	0·00
	Rates per 1,000 Live Births			
Deaths :				
All causes under 1 year of age	29·8(a)	33·8	29·4	39·10
Enteritis and Diarrhoea under 2 years of age	1·9	2·2	1·6	6·02
	Rates per 1,000 Total (Live & Still) Births			
Notifications (corrected)				
Puerperal Fever and Pyrexia	5·81	7·43	4·33	5·88
	(a) Per 1,000 related live births.			
	Maternal Mortality in England and Wales Rates per 1,000 Total (Live & Still) Births			
Pregnancy, Childbirth, Abortion, etc.				2·94

The number of deaths from all causes during 1950 is 182, and the figure for 1949 was 161, and the previous year to that it was 170 for your district. The main causes of death continue to be diseases of Heart and Blood Vessels generally, Malignant Disease, Bronchitis, and Tuberculosis. The number of deaths from Cancer, all ages, is 30 during the year, and this is in excess of the figure for 1949 which was 25, and the corresponding figure for the year before which was 24.

At the present time it appears that in your district about a dozen deaths are recorded each year from all forms of Tuberculosis, mostly Respiratory Tuberculosis.

The fact that there were no deaths during the year from Whooping Cough or Measles is encouraging, but I cannot express myself as being satisfied that two children under the age of 2 should have died from Diarrhoea, in these modern days with modern treatment. In most fatal cases it has been found in the past, that medical advice was not asked for early enough by the parents.

Infant Mortality Rate.

Of the thirteen infants who died under one year of age in 1950, nine died within the first week, and as in previous years, prematurity continues to be the main cause of infant wastage. As the figures relate to a total of only 332 live births during the year, it is quite certain that fluctuation in the Infant mortality figure will occur as I stated last year. These fluctuations have occurred in the past, and will occur in the future, and no excessive importance should be attached to the variation in this rate from 31 per 1,000 live births last year to 39 per 1,000 live births this year. I think the matter is brought into perspective when one considers that two years ago 24 infants died under one year of age, when there were 408 live births, but last year 11 infants died when there were 356 live births, and this year 13 infants have died out of 332 live births. The trend continues to be favourable.

Infants Under 1 Year of Age, 1950.

AGE AT DEATH.

Cause of Death	Weeks				Months					Total
	Under 1	1-2	2-3	3-4	1-2	2-3	3-6	6-9	9-12	
Cerebral Haemorrhage	2									2
Prematurity	6									6
Congenital Heart Disease							1			1
Congenital Malformations	1	1								2
Broncho Pneumonia		1								1
Gastro Enteritis									1	1
	9	2	—	—	—	—	1	—	1	13

The 13 infant deaths occurred during the following months of the year :— ,

Infant Deaths.

1st Quarter

January	1	} 7
February	...	...	...	...	...	2
March	...	...	...	...	...	4

2nd Quarter

April	—	} 2
May	...	...	...	...	...	2
June	...	...	...	...	...	—

3rd Quarter

July	1	} 3
August	...	...	...	...	...	2
September	...	...	...	...	...	—

4th Quarter

October	—	} 1
November	...	...	...	...	...	—
December	...	...	...	...	...	1

Maternal Mortality.

There was only one Maternal Death registered during the year, and this concerned a young married woman who attended the Ante-Natal Clinic at Conisbrough regularly, and no abnormality was found until the patient's last visit, when she complained of vomiting for the past few days.

The blood pressure at this time was slightly raised, and the patient was then referred to her family Doctor and admitted to the Montagu Hospital the following day.

The cause of death was Acute Obstetrical Yellow Atrophy of the Liver, and this Maternal Death is the first for three years.

1. GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

The full particulars of the Public Health Officers of your Authority are incorporated, for easy reference, at the beginning of this Report.

(a) **Laboratory Facilities.** Bacteriological and Pathological specimens are sent to the Medical Research Council Laboratory at Wakefield, under the direction of Dr. W. F. Lane, and these services are fully adequate. Blood examinations for Rhesus factor and Kahn tests of expectant mothers are undertaken by the Blood Transfusion Service, Sheffield.

(b) **Ambulance Facilities.** The ambulance facilities for your District are adequate and the Sub-Depot for the County Ambulance Service is at Bentley, where 5 ambulances and 3 sitting-case vehicles were available during the year. These services also cover adjacent Divisions.

(c) **Nursing in the Home.** In my report last year, I estimated there would be between 30 and 35,000 nursing visits in the Division during 1950. The total for the year was 33,000, an increase of 13,000 over 1949. The total number for the Conisbrough Urban District was 14,080, a total which is very satisfactory indeed.

There has been an increase of two nurses in the Home Nursing Service in the whole Division during the year, and at the end of the year, there were 5 Queen's Nurses, 3 State Registered and 1 State Enrolled Assistant Nurse. In your District there were 2 Queen's, and 1 State Registered Nurse employed whole-time, and 2 State Registered Nurses employed part-time. The team is mobile and well balanced. Overwork has probably led to sickness of Nurses.

The standard of nursing is excellent, and treatment in the home is carried out by the nurse, in each case, under the direction of the family doctor. There has been an increase of treatment by Nurses of modern anti-biotics during the year.

Nursing of Infants in the home has not increased during the year. The main bulk of home nursing is the cardiovascular degenerative diseases of the aged.

The estimate of nursing visits in 1951 in this Division is 50,000.

The work of the Home Nurse is appreciated greatly by the population, District Councils and other bodies. I think the loyalty displayed by the Nurses has been excellent.

(d) Treatment Centres and Clinics, including Clinics used solely for Diagnosis or Consultation.

**Child Welfare Centre, Miners' Welfare Hall,
Gardens Lane, Conisbrough.**

Monday : 9.30 a.m.—12 noon Minor Ailments Clinic.
 2.00 p.m.—4.30 p.m. Infant Welfare Clinic.

Tuesday : 2.00 p.m.—4.30 p.m. Ante-Natal Clinic.

Child Welfare Centre, Church Road, Denaby Main.

Monday : 9.30 a.m.—12 noon U.V.R. Clinic.

Tuesday : 9.30 a.m.—12 noon Minor Ailments Clinic.
 1.30 p.m.—4.30 p.m. Infant Welfare Clinic.

Wednesday : 9.30 a.m.—12 noon Ante-Natal Clinic.

Thursday : 9.30 a.m.—12 noon Minor Ailments Clinic.
 11.00 a.m.—12 noon Immunisation Clinic.
 1.30 p.m.—4.30 p.m. U.V.R. Clinic.

(e) Child Welfare Centres.

Attendances at the Child Welfare Centres in your District during 1950 show that the total number of attendances made by children were :—

	1950	1949
(a) Under one year of age ...	3,688	(4,013)
(b) Over one year of age	1,863	(2,421)

These figures show a slight decrease compared with the figures for 1949 (in brackets) but I consider that these are only commensurate with the gradual fall in the Birth Rate.

Sales of Milk Foods have shown a steady increase, and Health Visitors have an added responsibility in this respect. Total Receipts handled at the 2 Centres were :—

Conisbrough C.W.C. £262 0s. 0d. (approx.)

Denaby Main C.W.C. £210 0s 0d. (approx.)

(f) **Ante-Natal Clinics.** Ante-Natal Clinics were held at each of the Child Welfare Centres at Denaby and Conisbrough, under the care of Dr. J. C. A. Renshaw, Junior Obstetrician. A total number of 369 expectant mothers made a total of 1,849 visits to these Ante-Natal Clinics during the year.

(g) **Tuberculosis Dispensaries.**

Dispensary Sessions.

Tuberculosis Dispensary Monday : 10.00 a.m.—12 noon
Market Street, Wednesday: 10.00 a.m.—12 noon
Mexborough.

Tuberculosis Dispensary Thursday: 10.00 a.m.—12 noon
8, Goldthorpe Road,
Goldthorpe.

The staff of these Tuberculosis Dispensaries consist of a Tuberculosis Officer and two Tuberculosis Health Visitors, and a close liaison is kept between your Medical Officer of Health, Chief Sanitary Inspector, and the medical staff of the Tuberculosis Dispensary. Cases undergoing domiciliary treatment in overcrowded homes are investigated, and recommendations as necessary for re-housing placed before your Housing Committee.

(h) **Venereal Disease Clinic.** A Treatment and Diagnostic Clinic is held at 12 Frederick Street, Rotherham, and there are other Centres at Barnsley, Sheffield and Doncaster.

(i) **General Hospital Services** are provided in the main by the Montagu Hospital, Mexborough, Moorgate Hospital, Rotherham, and Barnsley Beckett Hospital. All these hospitals are well equipped and staffed, and treat a large number of acute and chronic cases, both as In and Out Patients. The liaison between the Local Health Authority and the Hospital Management Committee has been very close, and Dr. Cedric C. Harvey, Paediatrician, and Dr. J. C. A. Renshaw, Junior Obstetrician, both hold clinics at the Montagu Hospital, Mexborough.

(j) **Infectious Disease Hospitals.** Doncaster Isolation Hospital, and Kendray Hospital, Barnsley, have proved entirely adequate for the number of infectious disease cases arising in the area and requiring hospital isolation and treatment during the year.

(k) **Maternity Hospitals.** The Maternity Block of the Montagu Hospital, Mexborough, Listerdale Maternity Home, Hamilton Annexe (Doncaster), Hallamshire Maternity Home, St. Helen Hospital, Barnsley, and the Maternity Ward of the Moorgate General Hospital, Rotherham, have all been available during the year for booked cases on a priority system of admission. This system includes medical and obstetric conditions, and poor socio-medical conditions under which the expectant mother lives are ranked next highest on the list of priority for admission to hospital for confinement.

2. MENTAL HEALTH:

The Mental Health Service is making slight, though barely perceptible progress, and the promise of the building of a large Occupation Centre for mental defectives at Wath-on-Dearne, which would service this Division, is encouraging. Also during 1950, the Doncaster Borough Occupation Centre has been kind enough to admit four more of our mentally defective children, bringing the total number in attendance there from this Division up to 10. There are some 15 more mentally defective children (i.e. under 16 years) in this Division who would benefit from attendance at a Centre, and about 30 adult defectives who might be trained at, or at least find interest in, an Occupation Centre. The Social Worker has had 12 adult patients occupied on training in their own homes during the year, but has had little time to devote to them.

Admissions to Institutions.

There are still 16 defectives from this Division on the waiting list for admission to Institutions—two of which must be regarded as urgently in need of Institutional care. During 1950 two cases from the Division were admitted to Institutions.

Number of Mental Defectives.

At the end of 1950 there were altogether 140 mental defectives under supervision in this Division. Apart from the statutory visits paid to all defectives, extra visiting work has been required in about a quarter of the total number of cases.

Hospital Board Patients.

There is good co-operation between the Regional Hospital Boards and this Division on the subjects of the supervision of mental defectives "on licence" (numbering 3 in this area) and of reports on the homes of mental defectives detained in institutions (some 20—30 during 1950).

A very small, and so far rather unsuccessful Mental Hospital After-Care Service is run independently of the Hospital Boards. Co-operation with the Hospital Boards in this Section of the work could be developed much more.

Mental Health Service—Conisbrough Urban District, 1950.

Training.	3 children attending Doncaster Occupation Centre. 4 adults receiving home training.
Institutions & Vacancies.	2 Admissions to Mental Deficiency Institutions. Vacancies required for 6 boys and 3 girls.
West Riding Patients.	38 under Statutory Supervision. 9 under Voluntary Supervision. 2 under Guardianship.
Hospital Board Patients.	1 on Licence. 4 Cases of Mental Hospital after care.

The following Table details the Mental Health Social Worker's activities during the year :—

Mental Deficiency Acts, 1913-38.

	Div. 30	Conisbrough U.D.
1. No. of defectives ascertained during 1949	12	3 (6)
Total No. of defectives ascertained	140	50 (47)
2. No. under Guardianship	7 (9)	2 (2)
No. under Statutory Supervision	104 (109)	38 (40)
No. under Voluntary Supervision	26 (9)	9 (4)
No. on Licence from Institution	3 (1)	1 (1)
3. No. awaiting Institutional vacancies	16 (19)	9 (10)
No. attending Doncaster Occupation Centre	10 (6)	3 (3)
No. being home trained	2 (6)	4 (—)
Reports made for Regional Hospital Boards (Institutional patients)	15 (47)	3 (1)
After-care patients (Mental Hospital (under section 28 of the National Health Service Act	9 (7)	4 (2)

3. MATERNITY AND CHILD WELFARE.

(i) Health Visiting.

At least six Conferences have been held during the year with the Health Visitors in this Division, at the Child Welfare Centre, Mexborough, and I think that the idea of the Health Visitor being the family case worker has been accepted here.

No appointment of Senior Health Visitor was made, as I do not think it is, as yet, applicable here. In your District there were 2 Health Visitors and 2 Assistant Health Visitors working during the year and at the end of the year there were 6 Health Visitors and 7 Assistant Health Visitors working in the Division, with a population of just over 60,000 and the number of trained Health Visitors has risen from 4 to 6 in the year. This, I think, is quite satisfactory and I would be glad to see the same increase during 1951, bringing the total of trained Health Visitors up to 8, with an establishment of 13 Health Visitors and School Nurses.

The selective priority visits to illegitimate infants, premature infants, infants from problem families and infants from poor social backgrounds, have been in force during the whole of 1950. The illegitimate infant death rate in your District in 1949 was Nil per 1,000 illegitimate births. The figure for 1950 is 90.9 per 1,000 illegitimate live births.

With the broadening of the work as a whole with School Health work and Consultant Clinics, the tendency has again been for the clinics to absorb the Health Visitor for long periods each week, and I am trying to offset this as well as I can without increase in staff.

Meetings with the Area Food Officer were held and arrangements satisfactorily made for the Health Visitor to distribute vitamin tablets and orange juice at the Ante-Natal and Child Welfare Clinics.

The link with the family Doctor is being strengthened and contact with each of the 18 General Medical Practitioners with Practices in the Division has been made by the Health Visitors. About 26 problem families in the Division have been listed and confirmed, and of these 26, 12 reside in your District.

Frequent visits have been paid without much change in the socio-medical conditions of the family, but the infants in these families have been reared.

A great amount of advice has been given and I am quite satisfied with the results that have been obtained in the Health Visitors sphere generally during the year. There is the start of team spirit amongst the Visitors and increasing confidence due to their mastering their very difficult work.

(ii) Domiciliary Midwives.

The progress reported last year has been maintained and I am very satisfied with the work that has been carried out by the Domiciliary Midwives during the year.

The improvement in the neo-natal infant death rate has only been gradual, and this is the cause of anxiety to me. In essence, here in this Division, it is the control of the premature rate and I am still of the opinion that premature cots are a confession of failure. One of the keys to the cause of still-

births and premature births appears to be the diet of the expectant mother, and advice is being given to the expectant mother in the home and in the clinic, on the assumption that attention to the diet offers the best chance of improvement of the position.

Applications for Institutional Confinements.

During the year 355 applications were received for admission to Maternity Homes, and 315 cases, roughly 90% were booked. Of the remainder, 5 were cancelled and 35 declined. Most of the applications were for admission to the Montagu Hospital and in fact 215 cases were booked there. Other bookings, were at Listerdale Maternity Home, Hamilton Annexe, Moorgate General Hospital, and St. Helen Hospital, Barnsley.

A little over half the total bookings, 162 cases, were in the Priority II category, relating to poor home conditions. Abnormal cases, Priority I, totalled 90, and the remainder were mainly Primipara and fifth or subsequent pregnancies.

Ante-Natal Care.

Great emphasis has been placed by me on the Ante-Natal Health Visiting in the home, and each month now I hope that a thousand such visits will be paid to expectant mothers by 15 midwives, including 2 Relief Midwives.

Gas and Air Analgesia.

The take up of Gas and Air Analgesia is progressing satisfactorily and 60.1% of all domiciliary confinements in the Division in 1950, were associated with the administration of this analgesia, the figure for last year being 37.4%.

(iii) Care of the Premature Infant.

The Divisional Statistics show that of the 35 live premature babies born in Domiciliary Practice of Midwives, 23 were nursed in Sorrento Cots. Two of these babies died. In addition to the 2 Cots held in the Division, use was made on several occasions of the reserve Cot held in the Ambulance Centre, Wath-on-Deane. Only one low weight baby was

nursed in a Sorrento Cot in your District during the year. The baby weighed 4 lbs. 4 ozs. and was born in April. The midwife paid 54 visits to the mother and infant who was nursed for 39 days in the cot. The infant was successfully reared.

From the whole Division, a total of 58 premature infants were delivered in Institutions, including 2 stillbirths. Ten of the babies born alive subsequently died. The average weight of these babies at birth was 3 lbs. 12 ozs., and of those that survived, the average weight was 4 lbs. 14 ozs., which corresponds to the average weight of the babies that survived in Domiciliary Practice.

I feel that a baby of about 4 lbs. in weight which is born prematurely in the home is as safe to rear when the Sorrento technique is used as in the hospital.

During the year 3 Midwives were trained in the Sorrento method of care of the premature baby, and were awarded Certificates of Proficiency. Towards the end of the year, a scheme was put into operation so that when an expectant mother goes into premature labour at her home, arrangements are made for a premature baby cot to be delivered by ambulance, and the Sorrento trained Midwife brought in to receive the low weight baby into a warmed cot at the moment of birth. The equipment with the cot includes special feeders, baby clothes, hot water bottles, oxygen cylinders and a humidifier.

4. VACCINATION AND IMMUNISATION.

Facilities for Immunisation against Diphtheria and Vaccination against Smallpox are readily available in the district, but as will be obvious from the statistics, the full advantage is not being taken of these facilities.

Sessions of Immunisation against Diphtheria were carried out during the year in the Infant Schools in your district, when nearly 300 children were given primary immunisations and over 200 given booster doses. This meant that at the beginning of the year, 60% of the school children were immunised against Diphtheria, and at the end of the year 76% of school children were protected. This is a satisfactory state of protection of the school child population.

There was, however, a reduction in the number of infants and toddlers immunised during the year. Only 201 children under five were immunised, whereas 409 were protected in 1949. Nevertheless, the percentage of children under five years has risen from 42% protected at the beginning of the year, to 44% at the end of the year.

The percentage of all children under 15 years protected by immunisation against Diphtheria has risen from 54% at the beginning of 1950 to 64% at the end of 1950. This percentage of children protected must be increased, especially in the children under school age. Children should not be left unprotected by immunisation during the years before school, especially in your district, which in 1949 had two deaths from Diphtheria. Again, as will be seen from the statistics concerning vaccination against Smallpox, during the year there has been an increase over the previous year, but the total of 36 primary and 10 re-vaccination for the year is still not satisfactory.

I feel that it is not sufficiently realised that infants take primary vaccination reasonably well, but if this primary vaccination is left until adult life, then there may be a greater risk associated with the procedure.

I append a table of statistics relating to immunisation against Diphtheria and Vaccination against Smallpox, for the year ended 31st December, 1950.

Statistics relating to Diphtheria Immunisation and Vaccination for the Year ended 31st December, 1950.

DIPHTHERIA IMMUNISATION.

Urban District	No. of Children Immunised in 1950			Booster Doses in 1949	No. of Children Immunised at any time up to 31/12/50			Registrar-General's estimated mid-year population 1950			% Rate		
	Under 5 years	5—14 years	Total		Under 5 years	5—14 years	Total	Under 5 years	5—14 years	Total	Under 5 years	5—14 years	Total
Conisbrough U.D.C.	201	292	493	302	787	2236	3023	1756	2915	4671	44·8	76·7	64·7

VACCINATION, 1950.

Conisbrough U.D.C.		Under 1 year 1950	1—4 years 1946—49	5—14 years 1936—45	15 years and over	TOTAL
		13	14	5	4	36
	Primary					
	Re-Vaccination	1	—	1	8	10

5. SECTION 28—PREVENTION OF ILLNESS.—CARE AND AFTER-CARE.

(i) Hospital After-Care.

There has been an increase in the amount of after-care work from the Montagu Hospital, Mexborough, and at the end of 1950 this work was also being received from other hospitals. My records of this after-care work show that during the year 348 background reports were requested from hospitals and after-care through the Health Visitor was requested in 118 cases, the Home Nurses 151, the Midwife 3 cases and the Home Help in 25 cases. Preliminary arrangements for after-care by Miss J. L. Stowe centred upon the 38 bedded Fullerton Hospital at Denaby Main started at the end of the year.

(ii) Tuberculosis After-Care.

The two Tuberculosis Health Visitors carry out the necessary home visitations, clinical duties, etc., and I am pleased to report on the excellent co-ordination of this Service between the Consultant Chest Physician, the Tuberculosis Health Visitors and myself. As a result of housing investigations a number of notified priority domiciliary cases have been re-housed during the year through your Council whilst the nursing equipment, i.e., air-rings, sputum cups for domiciliary cases and garden chalets have been provided for the patients. Additionally, beds and bedding have been supplied in a number of cases for the segregation of patients, the cost being borne by the West Riding Distress Fund.

During the year the scheme for the provision of extra nourishment for Tuberculosis patients has continued to increase and two pints of milk per day were supplied to seven such patients during the year consequent upon the recommendation of the Consultant Tuberculosis Officer and myself.

It is hoped that the Mass Radiography Survey, similar to that which took place in this Division during September, 1949, may be arranged during the late spring or early summer of 1952.

6. SECTION 47—NATIONAL ASSISTANCE ACT, 1948.

During the year there has been no action taken by the Council under this Section, nor has any recommendation been made to you by myself. In cases where the possibility was envisaged, it has been found that Domestic Help, Home Nursing Service, and neighbours "sitting-in" have been quite adequate to solve the difficulties of the case.

7. HOME HELP SERVICE.

During the year throughout the Division, there has been an increase in the total number of cases in which this service has been made available. 252 Cases were assisted by Home Helps in 1949, and this year there have been 340 cases.

The following cases have been assisted in the Conisbrough Urban area as follows :—

Illness	...	...	...	...	23
Tuberculosis	...	...	...	...	1
Lying-in	...	...	...	...	23
Expectant Mothers	...	...	...	...	5
Aged sick	...	...	...	...	21
Aged infirm	...	...	...	...	12
c/o Children of School Age	...	...	...	...	2
					<hr/>
					87
					<hr/>

The service which employs on an hourly basis, suitable domestic helps, has been most efficiently run during the year, and has undoubtedly been a great help in the cases where it has been needed. The Domestic Help has been available merely to keep conditions satisfactory in the house, where there is sickness, especially where the Mother is ill or unable to carry out household work. Some of the homes have been small, and the hours for which the Home Help has attended have been cut down to a minimum. As this is a mining area, with only a slight amount of Industry using female labour, there has been no difficulty during the year of enlisting Home Helps.

SECTION F.

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

(i) Notifiable Diseases other than Tuberculosis.

The following Tables show that during the year ended 31st December, 1950, Whooping Cough, Measles, and Scarlet Fever again constituted the majority of notifications of infectious diseases which were reported to me from your District. The total number of infectious diseases notified was a reduction on the figure for 1949, the bulk of these notifications being 62 cases of Whooping Cough and 27 cases of Measles. There was a considerable reduction in cases of Scarlet Fever during the year and I am pleased to report that no deaths resulted from Whooping Cough, Measles or Scarlet Fever.

Three cases of Diphtheria were notified, two of which were subsequently confirmed, but once again no death resulted from this disease, both patients recovering.

One case of Acute Poliomyelitis in a school-boy was notified. The site of the Paralysis was in both legs and in the right arm. The boy has since regularly attended the Doncaster Infirmary for massage, and other treatment by the Orthopaedic Surgeon, and the general condition is now improved.

During the year immunisation clinics were organised for the schools in your District and the usual clinic sessions were held in the two Child Welfare Centres.

The children immunised during 1950 were as follows :—

Under 5 years of age.	5—14 years of age.	Booster Doses.
201	292	302

A Table showing the percentage rates of children immunised during the year ended 31st December, 1950, is shown under the Section headed "Vaccination and Immunisation."

INFECTIOUS DISEASES.

Notifiable Diseases(other than Tuberculosis) during 1950.

Disease	Total Cases Notified	Cases ad- mitted to Hospital	Deaths
Measles	27	—	—
Whooping Cough	62	2	—
Scarlet Fever	21	14	—
Diphtheria	3†	3	—
Ophthalmia Neonatorum	2	2	—
Puerperal Pyrexia	3‡	1	—
Acute Pneumonia	4	2	5
Erysipelas	1	—	—
Acute Poliomyelitis	1§	1	—
Dysentery	1	—	—
† 1 case only confirmed. ‡ 2 cases only confirmed. § 1 case only confirmed.			

INFECTIOUS DISEASES, 1950.

AGE DISTRIBUTION.

AGE				Scarlet Fever	Diphtheria	Pneumonia	Measles	Whooping Cough	Poliomyelitis	Erysipelas	Puerperal Pyrexia	Dysentery
Under 1	.....	.....	.....				4	13				
1—3	.....	.....	.....	3	1		4	17				
3—5	.....	.....	.....	13	1		11	25				
5—10	.....	.....	.....	5			8	7				1
10—15	.....	.....	.....			1						
15—35	.....	.....	.....		1				1		3	
35—45	.....	.....	.....			1						
45—65	.....	.....	.....			1						
65 and over	.....	.....	.....			1				1		
TOTAL	.....	.....	.....	21	3	4	27	62	1	1	3	1

TUBERCULOSIS.

A total of 24 new cases of Pulmonary Tuberculosis and 5 new cases of Non-Pulmonary Tuberculosis were notified during the year from your district, which has a total population of nearly 17,000 persons.

The previous year there was a total of 17 new cases of Pulmonary Tuberculosis and 7 Non-Pulmonary Tuberculosis, and in 1948 there were 15 new cases of Pulmonary Tuberculosis. When a fresh case is notified, the home visit is arranged by one of the two Tuberculosis Health Visitors in this Division, and a report on the home conditions is forwarded to me. During the year I made a recommendation for the priority rehousing of three cases of Pulmonary Tuberculosis, and also recommended that extra points be granted on account of the disease in two cases.

There is no doubt that there is an excessive number of fresh cases of Tuberculosis being notified, and that every means has to be taken to prevent the spread of this disease. One of these measures of control will be the institution of B.C.G. Vaccination, which will be offered, especially to certain of the young children of parents who are suffering from Pulmonary Tuberculosis.

TUBERCULOSIS.

New Cases and Mortality during 1950.

NEW CASES.

Age Periods	Pulmonary		Non-Pulmonary	
Years	M	F	M	F
0—1				
1—5	3		1	1
6—15	1		1	1
16—25	5	4		
26—35	1	2		1
36—45	2	1		
46—55	2			
56—65	2			
66 and upwards	1			
TOTALS	17	7	2	3

DEATHS.

Age Periods	Pulmonary		Non-Pulmonary	
Years	M	F	M	F
0—1	—	—	—	—
1—5	—	—	1	—
6—15	—	—	—	—
16—25	—	3	—	—
26—35	2	2	—	—
36—45	1	1	—	—
46—55	—	—	—	—
56—65	1	—	—	—
65 and upwards	1	—	—	—
TOTALS	5	6	1	—

CONISBROUGH URBAN DISTRICT COUNCIL

ANNUAL REPORT

OF THE

SANITARY INSPECTOR

for the year ending 31st December 1950

To the Chairman and Members of the
Conisbrough Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

It gives me great pleasure once again to report to you upon the work done in my Department for the year.

The Department's time has been spent during the year upon the repair of defective housing, abatement of nuisances and investigation of complaints, the waste water closet conversion programme and the promotion of the manufacture and sale of clean food.

The repair of defective housing is proving an exceedingly difficult problem during this post-war period and this problem will be with us for a few years; in fact it is a question if the rate of repair has caught up with the rate of depreciation. Landlords complain bitterly of increased building repair costs whilst rent are pegged at pre-war figures and point out that Local Authority Building Repair Funds have had to be increased to meet this post-war condition.

The inertia policy with regard to repairs has made itself felt with regard to this district, the Council's attitude that Notices must be enforced in default, in these cases, makes considerable extra work in the Department but does offer the public a safeguard which I believe is appreciated and well-worth the work caused in my opinion.

Another factor causing delay and making itself felt is the inability of the present building resources of this district to cope with the volume of repair work required. Local master builders are showing interest in new house building, the National Coal Board is reducing building repair staff and these two factors will, in the not too distant future, make themselves felt with regard to repairs in this district.

INSPECTORIAL STAFF.

Senior Sanitary Inspector & Public Cleansing Officer	R. E. INGLEBY, A.R.S.I., M.S.I.A., R.P.C.
Additional Sanitary Inspector	W. URMSON, A.R.S.I., M.S.I.A.
Clerical Assistant & Pupil, Sanitary Inspector	H. L. CHESHIRE
Chief Clerk	Mrs. R. WILLIS

The salaries of the Senior Sanitary Inspector and the additional Sanitary Inspector are contributed to by grants from the Ministry of Health.

WATER SUPPLIES.

The supplies to this district are obtained from deep wells, the water being obtained from the Doncaster and Tickhill Joint Water Board and the National Coal Board, domestic supplies being delivered to the houses out of the rising service mains in the majority of cases. A small service reservoir, situate in Conisbrough, does supply one part of the district whilst Denaby receives its supply direct from the National Coal Board who are the Water Authority for that area.

Purification.

The National Coal Board supply receives a softening treatment, this also includes a chlorination and filtration treatment prior to distribution. Further treatment by the Local Authority is not undertaken. Doncaster and Tickhill Joint Water Board supply does not receive any treatment.

Bacteriological Analysis.

Twenty-three samples of water were submitted for analysis this year by the Local Authority and the National Coal Board, results were as follows : 15 were placed in Class 1, 7 were in Class 2, and 1 in Class 4. The number of dwelling houses on supply is 4,182.

DRAINS AND SEWERAGE.

No major extensions have been made to the sewers in the district this year, additional housing has resulted in increased drainage, other factors causing increased drainage are the provision of bathrooms to certain privately owned houses and the conversion of a further 63 closets to water closets.

CLOSET ACCOMMODATION.

There are at the present time within the district the following forms of sanitary conveniences :

Pail Closets	...	...	...	...	...	...	2
Privy Middens	...	...	...	...	...	...	10
Pedestal Water Closets	...	...	...	...	...	...	4968
Waste Water Closets	...	...	...	...	...	...	38
Trough Closets	...	...	...	...	...	...	4

Unfortunately the most undesirable type of conveniences are situate considerable distances from the sewers in the district and in some cases the level of the convenience is below the level of the sewer.

RIVERS AND STREAMS.

No complaints have been made with regard to rivers and streams during this year, inspections have been made to ascertain that no contamination of the river has occurred in this area.

SMOKE ABATEMENT.

Eleven observations have been made during the year relative to smoke prevention, on nine occasions investigations followed. Low grade fuel was in certain cases offered as the explanation, in other cases it was found that the labour employed did not have the proper knowledge of boilerhouse practice and that this was contributing in no small degree to the trouble. It is unfortunate that this type of labour is still employed, as not only a potential danger to health could be avoided, but a probable coal-saving could be effected.

Domestic smoke in certain districts in this area is also a problem which will have to be tackled if the inhabitants are to enjoy better living conditions and the more antiquated type of range which causes more smoke, takes longer to clean, causes more dust and work for the housewife appears to have had its day.

SANITARY INSPECTION OF THE DISTRICT.

During the year the following inspections were made :

General Inspections as to complains, nuisances and etc.,	...	...	...	...	...	...	1,074
Re-inspections regarding repairs etc.	...	...					850
Matters appertaining to food	...	...	...				371
Inspection of :							
Factories	...	...	...	...	...	...	59
Houses	...	...	...	...	...	...	1,382
Temporary dwellings and buildings	...	...					6
Schools	...	...	...	...	...	...	10
Cinemas	...	...	...	...	...	...	2
I.D. Prevention and Disinfection	...	...	...				21
Smoke Observations	...	...	...	...	...		11
Rats and Mice	...	...	...	...	...	...	44
Refuse and Collection and Disposal	...	...					125
Drainage	...	...	...	...	...	...	234
Water Supply	...	...	...	...	...	...	30
Slaughterhouses	...	...	...	...	...	...	41
Meat Shops and Vans	...	...	...	...	...		27
Grocers	...	...	...	...	...	...	109
Greengrocers and Fish	...	...	...	...	...		4
Dairies	...	...	...	...	...	...	27
Ice Cream Premises and Vans	...	...	...				41
Food Preparing Premises	...	...	...	...	...		49
Market	...	...	...	...	...	...	16
Hawkers	...	...	...	...	...	...	10
Fish and Chip Shops	...	...	...	...	...		16
Miscellaneous Food Visits	...	...	...	...			31
							2,295

LIST OF NUISANCES DISCOVERED.

Drainage :

Obstructions to Drainage	...	...	...	...	20
Defective Drainage	...	...	...	...	23
Drains requiring renewal	...	...	...	...	15
Defective Gulleys	...	...	...	...	18
R.W.P.'s connected directly to drainage	...				10
R.W.P.'s and Vent Pipes defective	...	...			65
Choked Sewers	...	...	...	...	8
Defective Sink Waste Pipes	...	...	...	...	6
Defective W.C.'s	...	...	...	...	20
Defective roofing (slates, flashing and pointing)					47
Defective chimney stacks and pots	...	...			34
Defective brickwork or pointing to walls and rising dampness	...	...	...	...	50
Defective wall plaster	...	...	...	...	31
Defective ceiling plaster	...	...	...	...	36
Defective internal floors	...	...	...	...	19
Insufficient ventilation	...	...	...	...	39
Defective water supply	...	...	...	...	6
Defective fireplaces and flues	...	...	...		30
Defective wash boilers	...	...	...	...	2
Rodent complaints investigated	...	...	...		27
Defective doors and gates	...	...	...	...	21
Verminous premises	...	...	...	...	24
Deposits of refuse	...	...	...	...	118
Miscellaneous	...	...	...	...	66

LIST OF NUISANCES ABATED

Obstructions removed	...	...	...	...	...	24
Drainage repaired	...	...	...	...	...	23
Renewed or relayed drainage	...	...	...	...	...	15
Gullies provided	...	...	...	...	...	22
R.W.P.'s disconnected	...	...	...	...	...	10
Obstructions in sewers removed	...	...	...	...	...	12
R.W.P.'s and Vent Pipes repaired	...	...	...	...	...	90
Sink waste-pipes repaired	...	...	...	...	...	8
W.C.'s repaired	...	...	...	...	...	42
W.W.C.'s converted to W.C.'s	...	...	...	...	...	62
Defective roofing (slates, flashings, pointings)	...	...	...	...	...	73
Defective brickwork or pointing to walls and rising dampness	...	...	...	...	...	53
Defective chimney stacks and pots	...	...	...	...	...	15
Defective wall plaster	...	...	...	...	...	87
Defective ceiling plaster repaired or renewed	...	...	...	...	...	55
Defective internal floors	...	...	...	...	...	34
Insufficient ventilation	...	...	...	...	...	44
Defective water supply	...	...	...	...	...	6
Defective fireplaces and flues	...	...	...	...	...	61
Defective wash boilers	...	...	...	...	...	17
Rodent complaints	...	...	...	...	...	27
Defective doors and gates	...	...	...	...	...	12
Verminous premises	...	...	...	...	...	24
Accumulations and deposits of refuse	...	...	...	...	...	118
Miscellaneous	...	...	...	...	...	66

HOUSING.

An indication of the work done in connection with this subject can be obtained from the following statistics :

Number of dwelling houses in the district	...	...	...	4,187
Number of back-to-back houses included in above	...	...	...	Nil

1. Inspection of dwelling houses during the year :

(1) (a) Total number of dwelling houses inspected for housing defects	...	...	...	...	272
(b) Number of inspections made in connection with housing defects	...	...	...	...	1,382

(2) Number of dwelling houses needing further action :

(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	1
(b) Number (excluding those in sub-head (2) (a) above) found not in all respects reasonably fit for human habitation	272

2. Remedy of defects during the year without service of formal notices :

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	62
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3. Action under Statutory Powers during the year :

A. Proceedings under Section 9, 10, and 16, Housing Act, 1936 :

(1) Number of dwelling houses in respect of which notices were served requiring repairs	92
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By Owners	34
(b) By Local Authority	Nil

B. Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	106
(2) Number of dwellinghouses in which defects were remedied after service of formal notices:	
(a) By Owners	19
(b) By Local Authority in default of owners	70

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.

(1) Number of representations etc., made in respect of dwellinghouses unfit for habitation	2
(2) Number of dwellinghouses in respect of which Demolition Orders were made	1
(3) Number of dwellinghouses demolished in pursuance of Demolition Orders	Nil

D. Proceedings under Section 12 of the Housing Act, 1936.

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	... ..	1
(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	... ..	Nil

4. Housing Act, 1936 - Part IV - Overcrowding.

(a) (1) Number of dwellings overcrowded at the end of the year	... .. not known accurately	
(2) Number of families dwelling therein.		
(3) Number of persons dwelling therein.		
(b) Number of new cases of overcrowding reported during the year	... ..	10
(c) (1) Number of cases of overcrowding relieved during the year	... ..	36
(2) Number of persons concerned in such cases		

5. New Houses :

Number of new houses provided during the year :

By the Local Authority :

Permanent type (all 2 W.C.'s)	30
Temporary type	—

By private Enterprise	6
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6. Housing Act. 1949.

Any action in connection with Section 20, "Grants to persons other than Local Authorities for improvements of housing accommodation"	No.
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Eradication of Bed Bugs.

There has, during the last few years, been an increase in the number of premises found to be in an infested condition the figures are as follows :

1946—3, 147—8, 1948—8, 1949—15, 1950—24.

In all cases where this condition has been encountered disinfection measures have been taken,

Tents, Vans and Sheds.

Number in the district - 6.

FACTORIES

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occup'rs Prosecuted
(1) Factories in which Sec. 1, 2, 3, 4 and 6 are to be enforced by the Local Authority	11	11	—	—
(2) Factories not included in : (1) in which Sec. 7 is enforced by the Local Authority	33	48	2	—
(3) Other premises in which Sec. 7 is enforced by the Local Authority (excluding Outworkers)	—	—	—	—
TOTAL	44	59	2	—

Cases in which defects were found.

	Found	Remedied	Referred to H.M. Inspector	By H.M. Inspector Pr's'ct'ns
Sanitary Conveniences	2	2	—	—
Insufficient, unsuitable or defective	—	—	—	—
Not separate for sexes	—	—	—	—
TOTAL	2	2	—	—

FOOD.

Milk Supply.

Inspections have been carried out at premises used by wholesalers and retailers in the district. In one case it was found necessary to require improvement and this work is now in hand.

The deposit of milk on the highway by certain retailers has now ceased since the matter was taken up with the offenders and with the use of the more modern forms of transportation for delivery this undesirable practice should not recur.

There are 34 purveyors of milk upon the Register and the majority of milk sold within the district is Heat Treated or Pasteurised, only one retailer sells raw milk which he produces on his farm in the district.

Six samples of milk were submitted for examination to the Public Health Laboratory Service at Wakefield, the only unsatisfactory one was a heat-treated milk which received treatment outside this area, this matter was taken up with the vendor.

Ice Cream.

There are fourteen registered premises for the sale of ice cream in the district but no premises registered for the manufacture of this food. There are also a number of motor vehicles from Doncaster, Mexborough, Tickhill and Rotherham who hawk this commodity round the district at week-ends.

The whole of the ice-cream sold from the shops is the "pre-packed" variety but this is not the case with the hawkers who pay flying visits at the week-end.

In cases where unsatisfactory samples were taken "warning letters" were sent and further samples taken. This method has proved satisfactory and legal proceedings has not been found necessary.

The result of the sampling is as follows :

Grades	Shop	Van	Canteens	TOTAL
1	6	4	0	10
2	0	3	0	3
3	2	1	0	3
4	1	0	0	1
TOTAL				17

Fat content samples were submitted and these varied from 3.53% up to 12.01%.

It is noticeable that all vendors of ice cream excepting two shops, sell lollipops, this material is not subjected to sterilisation during manufacture nor any heat treatment regulations and has therefore a higher potential health hazard, furthermore some of the younger generation are getting sore mouths and lips for partaking of this commodity, this appears to be caused by the storage conditions prior to sale.

Meat and Other Foods.

The supply of meat to the district is obtained from the Ministry of Food slaughterhouse at Sheffield and delivered to a central point in the district for distribution to the local butchers.

Transportation of the meat into the district and the distribution from the central pool point is still not up to the standard which is considered desirable but it is stated that different types of waggons are ordered and that when these are available they will be put into use.

Local slaughtering is only undertaken for the purpose of "Home Fed" bacon and the majority of this is done in four private slaughterhouses, slaughtering upon allotments has practically died out. No generalised tuberculosis carcasses have been encountered. (See report).

	Cattle excl'd'g Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	nil	nil	nil	nil	100
Number inspected	nil	nil	nil	nil	100
All diseases except tuberculosis. Whole carcasses condemned	nil	nil	nil	nil	nil
Carcases of which some portion or organ was condemned	nil	nil	nil	nil	4
Percentage of number inspected affected with diseases other than tuberculosis	nil	nil	nil	nil	4%
Tuberculosis only. Whole carcasses condemned	nil	nil	nil	nil	nil
Carcases of which some part or organ was condemned	nil	nil	nil	nil	9
Percentage of number inspected affected with tuberculosis	nil	nil	nil	nil	9%

Tuberculosis was again encountered among cottagers pigs this year, nine carcasses were found to be affected. 41 inspections were made at the slaughterhouses in the district and 6 other premises were also visited for the purpose of inspecting these carcasses.

Food Poisoning.

No food poisoning outbreaks have occurred in this district during the year.

Clean Food Campaign.

No special campaign has been launched in this district during the year with regard to clean food. 371 inspections have been made to shops and premises where food is handled and advice given when it was considered necessary to both management and staff.

Seizure of Unsound Food.

The following quantities of food have been condemned during the year. The food condemned has been surrendered by the vendor and it has not been found necessary to institute legal proceedings with regard to this matter.

Annual Report, 1950.

156 tins Tomatoes	3 tins Apple Puree
5 lbs. Lemon Curd	1 tin Pilchards
18 lbs. Jam	2 tins Herrings
21 tins Sweetened Milk	1 jar Pickled Gherkins
39 tins Peas	1 jar Pickled Red Cabbage
10 2 lb. Loaves	1 tin Plums
108 lbs. Butter	1 jar Meat Paste
2 lbs. 12 ozs. Pigs' Mysentery	1 tin Pears
5 tins Rhubarb	3 jars Pears
5 pkts. Creamola	16 bottles Sauce
5 pkts. Creamola Sponge	1 jar Onions
42 pkts. Cake Mixture	50 pkts. Bisto
23 cups Malt	5 tins Soup
16 pkts. Pom	1 tin Macedoine
1 tin Spinach Puree	1 tin Sliced Apples
12 tins Mussels	2 bottles Tomato Ketchup
10 tins Silver Hake	1 tin Tomato Juice
7½ lbs. Ground Barley	4 lbs. Marmalade
26 tins Coffee	2 jars Mincemeat
17 tins Beans in Tomato	1 lb. Honey
19 tins Unsweetened Milk	1 tin Carrots
1 tin Meat Paste	1 tin Grapes
27 lbs. Mfg. Meat	1 jar Chutney
9 tins Luncheon Meat	1 tin Barley Crystals
9½ dozen Eggs	

Rodent Control.

This matter has been vigourously dealt with during the year and it has been found necessary in one case to take Statutory Action with regard to proofing of the building, the work is at present being executed. A general sewer treatment was not found necessary and a partial treatment in part of the sewer was however undertaken, as a result of this infestation a defect in the sewer was revealed. There does not appear to be a large number of houses infested, but at certain times of the year the allotments cause some trouble because of migrating habits of rats when their food supply is stopped.

Cleansing - Collection.

The reluctance of property owners to renew defective dust bins is placing extra strain upon this service, and also increased distances are having to be worked because of housing expansion.

The attitude which has been adopted with regard to the former matter, since the High Court decision could cause a fly nuisance problem and one can also foresee surface water sewers being partially choked due to the deposit of ashes in the streets.

Another factor which causes apprehension is the possible steel and zinc shortage which points to the facts that dust bins will be in short supply in the not far distant future.

Disposal.

It is estimated that 11,297 tons of refuse was dealt with at the tips for the year ending 31st March, 1950. The Craggs tip will be completed during the year but the conversion of this into a playing field will depend upon the monies available which can be used for the recovering and removal of soil on to the tip.

Tipping at Sheffield Road is proceeding satisfactorily but security of tenure has not yet been settled.

Salvage.

The price offered for materials salvaged has shown a tendency to harden, and waste paper prices have made a definite improvement, this has resulted in an increase of money being obtained from Salvage and the year's revenue is £606.

HOUSE REFUSE COLLECTION AND DISPOSAL

Total Cost of Collection and Disposal of the Town's refuse is as follows :

Refuse Collection and Disposal	...	...	£7092	0s.	0d.
Revenue	...	...	...	£606	0s. 0d.
<hr/>					
Net Cost	...	...	£6486	0s.	0d.

Pop.	No. of Weekly Collections House Trade	Method of Collection	Method of Collection	Collection and Disposal Costs							
				Total Cost	Total Tons (est.)	No. of Hses.	Cost per Ton	Cost per House	Cost per 1000 Hses.	Cost per Head of Popul't'n	Cost 1000 Head of Popul't'n
16,660	1	One 7 cu. yds. and One 10 cu. yds. One 15 cu. yds. Two latter vehicles are Dustbin Loading	Controlled Tip	£6,486	11,297	4,187	11s. 5 $\frac{3}{4}$	£1.54	£1549	7s. 9.4d.	£389

May I add my thanks to those expressed by the Medical Officer to the Council for its assistance and interest in Public Health matters relative to this district during the year.

I also wish to thank the Medical Officer of Health for the confidence and trust he has shown in this Department's work during the year, also for the close co-operation I have received from the Clerk of the Council, and other Officers, who have assisted me in the execution of Public Health matters.

I am, Sirs,

Your obedient Servant,

R. E. INGLEBY,
Senior Sanitary Inspector.
Public Cleansing Officer.

RUSSELLS (MEXBOROUGH) LTD. MEXBOROUGH, YORKS.
